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B1 (Official Form 1	1) (1/08		Stat	os Ra	ankruptcy	C_{i}	ourt					
					ankruptcy ct of Califo						V	oluntary Petition
Name of Debtor (if indi		ter Last, First	, Middle):			Name of Joint Debtor (Spouse) (Last, First, Middle): Ray, Laura Elizabeth):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):							
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4788					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 0927							
Street Address of Debtor (No. & Street, City, State & 2590 California Park Drive #11 Chico, CA				ራ Zip Code):			Street Address of Joint Debtor (No. & Street, City, State & Zip Cod 1180 Metalmark Way Chico, CA				State & Zip Code):	
Omoo, 0A		· 	Z	ZIPCODE 95928								ZIPCODE 95973
County of Residence or Butte	of the Prir	ncipal Place o	of Busine	ess:			County of Butte	Residence	e or of t	the Principal Pla	ce of Bu	siness:
Mailing Address of Deb	otor (if diff	ferent from st	reet addi	ress)			Mailing A	ddress of	Joint D	ebtor (if differer	nt from s	treet address):
				IPCOD			1					ZIPCODE
Location of Principal As	ssets of Bu	isiness Debto	r (if diff	erent fro	om street addres	s ab	ove):					
Typo	of Debter	r	. 1		Nature	of R	usiness		<u> </u>	Chanter of D	n keest	ZIPCODE
Type of Debtor (Form of Organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)				(Check one bo			the Petition is Filed (Check one box Chapter 7			hapter 15 Petition for ecognition of a Foreign lain Proceeding hapter 15 Petition for ecognition of a Foreign onmain Proceeding on the box.) mer Debts are primarily business debts.		
				Titl	(Check box, btor is a tax-exer le 26 of the Unit ernal Revenue C	mpt ed S	organization tates Code (t		ind per	101(8) as "incur dividual primaril rsonal, family, o ld purpose."	ly for a r house-	
	J	Fee (Check o	ne box)				Check one	box:		Chapter 11 I	Debtors	
✓ Full Filing Fee attach Filing Fee to be paid attach signed applicat is unable to pay fee es 3A. Filing Fee waiver req	in installm tion for the except in in	e court's cons stallments. R	ideration ule 1006	n certify (b). See	ving that the debi e Official Form		Debtor i Debtor i Check if: Debtor's	s a small s not a sn s aggregat s are less	nall bus te nonco than \$2	ontingent liquida,190,000.	defined i	I U.S.C. § 101(51D). n 11 U.S.C. § 101(51D). s owed to non-insiders or
attach signed applicat		•			• ,		☐ A plan i ☐ Accepta	s being fi nces of th	led with ie plan v	this petition		n from one or more classes of
Statistical/Administra Debtor estimates the Debtor estimates the distribution to unsec	at funds wi at, after any	ill be availabl y exempt pro						id, there v	vill be r	no funds availab	le for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Cr 1-49 50-99 10	1	□ 200-999	☐ 1,000- 5,000		5,001- 10,000		001- 000	25,001- 50,000		50,001- 100,000	Over 100,000	0
Estimated Assets	_						,					2009-35228
	00,001 to	\$500,001 to \$1 million	\$1,000 \$10 mi		\$10,000,001 to \$50 million		0,000,001 to 00 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More \$1 bill	FILED July 22, 2009
Estimated Liabilities So to \$50,001 to \$1 \$50,000 \$50	00,001 to	\$500,001 to \$1 million	\$1,000 \$10 mi		\$10,000,001 to \$50 million	\$50 \$10	0,000,001 to 00 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More	11:58 AM RELIEF ORDEREI CLERK, U.S. BANKRUPTCY C
												EASTERN DISTRICT OF CALIF

B1 (Official Form 1) (1/08)		Page 2
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Ray, Matthew Cory & Ray, L	aura Elizabeth
Prior Bankruptcy Case Filed Within Last 8	3 Years (If more than two, attach	additional sheet)
Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition.	(To be completed whose debts are pr I, the attorney for the petitioner r that I have informed the petition chapter 7, 11, 12, or 13 of tit explained the relief available un	if debtor is an individual rimarily consumer debts.) mamed in the foregoing petition, declare that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify the notice required by § 342(b) of the
	Signature of Attorney for Debtor(s)	Date
Yes, and Exhibit C is attached and made a part of this petition. No Exhi (To be completed by every individual debtor. If a joint petition is filed, eximple to the completed and signed by the debtor is attached and mail this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	de a part of this petition.	ch a separate Exhibit D.)
Information Pagardi	ng the Debtor - Venue	
	pplicable box.) of business, or principal assets in th days than in any other District. partner, or partnership pending in t ace of business or principal assets	this District. in the United States in this District,
in this District, or the interests of the parties will be served in reg		
Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of deb	olicable boxes.)	-
(Name of landlord or less	or that obtained judgment)	
(Address of lan	idlord or lessor)	
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for pos	e circumstances under which the de	
Debtor has included in this petition the deposit with the court of filing of the petition.	,	

Debtor certifies that he/she has served the Landlord with this cerafication. (11 U.S.C. § 362(1)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

(Check only one box.)

Date

§ 1515 are attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Ray, Matthew Cory & Ray, Laura Elizabeth

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this

petition is true and correct, that I am the foreign representative of a debtor

☐ I request relief in accordance with chapter 15 of title 11, United

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the

States Code. Certified copies of the documents required by 11 U.S.C.

chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

in a foreign proceeding, and that I am authorized to file this petition.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Attorney*

× Manage of Debtor A Ray

Matthew Cory Ray

Laura Elizabeth Ray

Signature of Joint Debtor (530) 828-7124

Telephone Number (If not represented by attorney)

Douglas B. Jacobs 084153

20 Independence Circle

djacobs@jacobsanderson.com

Jacobs, Anderson, Potter and Chaplin

Douglas B. Jacobs

Chico, CA 95973

July 21, 2009

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

July 21, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filling fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Date

Case No. (if known)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of
X	the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, r partner whose Social Security number is provided above.	responsible person, or
Certificat I (We), the debtor(s), affirm that I (we) have received and read to	te of the Debtor his notice.
Ray, Matthew Cory & Ray, Laura Elizabeth Printed Name(s) of Debtor(s)	X Max 7/21/2009 Signature of Debtor Date

Signature of Joint Debtor (if any)

United States Bankruptcy Court Eastern District of California

IN RE:	Case No.
Ray, Matthew Cory	Chapter 7
Debtor(s)	
EXHIBIT D - INDIVIDUAL DEBTOR WITH CREDIT COUNSE	
Warning: You must be able to check truthfully one of the five stado so, you are not eligible to file a bankruptcy case, and the cour whatever filing fee you paid, and your creditors will be able to re and you file another bankruptcy case later, you may be required to stop creditors' collection activities.	t can dismiss any case you do file. If that happens, you will lose esume collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is filone of the five statements below and attach any documents as direct	led, each spouse must complete and file a separate Exhibit D. Check ed.
✓ 1. Within the 180 days before the filing of my bankruptcy case the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, and I have a certificate from the certificate and a copy of any debt repayment plan developed through	he opportunities for available credit counseling and assisted me in agency describing the services provided to me. Attach a copy of the
2. Within the 180 days before the filing of my bankruptcy case the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, but I do not have a certificate from a copy of a certificate from the agency describing the services provide the agency no later than 15 days after your bankruptcy case is filed.	he opportunities for available credit counseling and assisted me in om the agency describing the services provided to me. You must file
3. I certify that I requested credit counseling services from an approach approach the time I made my request, and the following exigent requirement so I can file my bankruptcy case now. [Summarize exigent property of the country o	circumstances merit a temporary waiver of the credit counseling
If your certification is satisfactory to the court, you must still oby you file your bankruptcy petition and promptly file a certificate from any debt management plan developed through the agency. Fail case. Any extension of the 30-day deadline can be granted only for also be dismissed if the court is not satisfied with your reasons to counseling briefing.	om the agency that provided the counseling, together with a copy lure to fulfill these requirements may result in dismissal of your or cause and is limited to a maximum of 15 days. Your case may
4. I am not required to receive a credit counseling briefing because motion for determination by the court.	e of: [Check the applicable statement.] [Must be accompanied by a
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by of realizing and making rational decisions with respect to final	reason of mental illness or mental deficiency so as to be incapable incial responsibilities.);
 Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically participate in a credit counseling briefing in person, by teleph Active military duty in a military combat zone. 	impaired to the extent of being unable, after reasonable effort, to one, or through the Internet.);
5. The United States trustee or bankruptcy administrator has deter does not apply in this district.	mined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provided above	e is true and correct.
Signature of Debtor:	
Date: July 21, 2009	

Certificate Number: <u>01356-CAE-CC-007652356</u>

CERTIFICATE OF COUNSELING

I CERTIFY that on July 12, 2009	, at	5:47	_ o'clock PM EDT,
Matthew Ray		received	from
Hummingbird Credit Counseling and Education	n, Inc.		<u>.</u>
an agency approved pursuant to 11 U.S.C.	§ 111 to	provide credit c	counseling in the
Eastern District of California	, aı	n individual [or	group] briefing that complied
with the provisions of 11 U.S.C. §§ 109(h)	and 111		
A debt repayment plan was not prepared	If a d	lebt repayment	plan was prepared, a copy of
the debt repayment plan is attached to this	certificat	e.	
This counseling session was conducted by	internet a	nd telephone	·
Date: July 12, 2009	Ву	/s/Amy Sloan	
	Name	Amy Sloan	
	Title	Certified Couns	selor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

United States Bankruptcy Court Eastern District of California

IN RE:	Case No.
Ray, Laura Elizabeth	Chapter 7
Debtor(s) EXHIBIT D - INDIVIDUAL DEBTOR'S S WITH CREDIT COUNSELI	
Warning: You must be able to check truthfully one of the five staten do so, you are not eligible to file a bankruptcy case, and the court ca whatever filing fee you paid, and your creditors will be able to resurand you file another bankruptcy case later, you may be required to to stop creditors' collection activities.	nents regarding credit counseling listed below. If you cannot in dismiss any case you do file. If that happens, you will lose me collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is filed, one of the five statements below and attach any documents as directed.	each spouse must complete and file a separate Exhibit D. Check
1. Within the 180 days before the filing of my bankruptcy case , I rethe United States trustee or bankruptcy administrator that outlined the operforming a related budget analysis, and I have a certificate from the age certificate and a copy of any debt repayment plan developed through the	opportunities for available credit counseling and assisted me in ency describing the services provided to me. Attach a copy of the
2. Within the 180 days before the filing of my bankruptcy case , I re the United States trustee or bankruptcy administrator that outlined the operforming a related budget analysis, but I do not have a certificate from a copy of a certificate from the agency describing the services provided to the agency no later than 15 days after your bankruptcy case is filed.	opportunities for available credit counseling and assisted me in the agency describing the services provided to me. You must file
3. I certify that I requested credit counseling services from an approved any from the time I made my request, and the following exigent circ requirement so I can file my bankruptcy case now. [Summarize exigent of the country of th	cumstances merit a temporary waiver of the credit counseling
If your certification is satisfactory to the court, you must still obtain you file your bankruptcy petition and promptly file a certificate from of any debt management plan developed through the agency. Failure case. Any extension of the 30-day deadline can be granted only for c	the agency that provided the counseling, together with a copy e to fulfill these requirements may result in dismissal of your
also be dismissed if the court is not satisfied with your reasons for counseling briefing.	
 4. I am not required to receive a credit counseling briefing because of motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by rea of realizing and making rational decisions with respect to financial Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically imparticipate in a credit counseling briefing in person, by telephone Active military duty in a military combat zone. 	son of mental illness or mental deficiency so as to be incapable al responsibilities.); paired to the extent of being unable, after reasonable effort, to
5. The United States trustee or bankruptcy administrator has determine does not apply in this district.	ned that the credit counseling requirement of 11 U.S.C. § 109(h)
Signature of Debtor: Date: July 21, 2009	true and correct.

Certificate Number: 01356-CAE-CC-007652339

CERTIFICATE OF COUNSELING

I CERTIFY that on July 12, 2009	, a	t <u>5:43</u>	o'clock <u>PM EDT</u> ,				
Laura Ray		received	from				
Hummingbird Credit Counseling and Education	n, Inc.		,				
an agency approved pursuant to 11 U.S.C.	§ 111 to	provide credit	counseling in the				
Eastern District of California	, a	n individual [o	r group] briefing that complied				
with the provisions of 11 U.S.C. §§ 109(h)	and 111						
A debt repayment plan was not prepared	If a c	lebt repayment	plan was prepared, a copy of				
the debt repayment plan is attached to this o	the debt repayment plan is attached to this certificate.						
This counseling session was conducted by	internet a	nd telephone					
Date: July 12, 2009	Ву	/s/Amy Sloan					
	Name	Amy Sloan					
	Title	Certified Coun	selor				

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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	© 1993-2009 EZ-Filing, Inc. 11-80

B22A (Official Form 22A) (Chapter 7) (12/08)	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re: Ray, Matthew Cory & Ray, Laura Elizabeth Debtor(s)	 ☐ The presumption arises ☑ The presumption does not arise ☐ The presumption is temporarily inapplicable.
Case Number:(Ifknown)	· .

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

Part I. MILITARY AND NON-CONSUMER DEBTORS

1 A	Disabled Veterans. If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
1/1	□ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	☐ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/
	☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR .
	b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on

		Part II. CALCULATION (OF MONTH	LY INCO	ME FOR § 707(b)(7) I	EXC	LUSION		
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
	b. Married, not filing jointly, with declaration of separate households. By checking the penalty of perjury: "My spouse and I are legally separated under applicable non-base are living apart other than for the purpose of evading the requirements of § 707(b). Complete only Column A ("Debtor's Income") for Lines 3-11.					ıptcy	law or my s	pous	e and I
2	c. 🗌	Married, not filing jointly, without Column A ("Debtor's Income") a					above. Con	nplet	e both
	d. 🗹	Married, filing jointly. Complete b Lines 3-11.		• •	ŕ		Spouse's In	com	e") for
	the si	igures must reflect average monthly ix calendar months prior to filing the the before the filing. If the amount of divide the six-month total by six, ar	e bankruptcy co monthly incon	ase, ending ne varied dı	on the last day of the tring the six months, you]	Column A Debtor's Income	s	olumn B pouse's Income
3	Gros	ss wages, salary, tips, bonuses, ove	rtime, commi	ssions.		\$	2,250.00	\$	4,253.00
4	a and one b	me from the operation of a busine denter the difference in the appropri business, profession or farm, enter as thment. Do not enter a number less the nses entered on Line b as a deduction	ate column(s) ggregate numb han zero. Do n	of Line 4. It ers and pro ot include	you operate more than vide details on an				
	a.	Gross receipts		\$					
	b.	Ordinary and necessary business e	xpenses	\$					
	c.	Business income		Subtract I	ine b from Line a	\$		\$	
	diffe	t and other real property income. rence in the appropriate column(s) o nclude any part of the operating of V.	of Line 5. Do n	ot enter a n	imber less than zero. Do				
5	a.	Gross receipts		\$					
	b.	Ordinary and necessary operating	expenses	\$					
	c.	Rent and other real property incon	ne	Subtract I	ine b from Line a	\$	* 12*	\$	•
6	Inter	rest, dividends, and royalties.				\$		\$	
7	Pens	ion and retirement income.				\$		\$	
8	expe that	amounts paid by another person on sess of the debtor or the debtor's purpose. Do not include alimony or pur spouse if Column B is completed	dependents, in separate main	ncluding cl	ild support paid for	\$		\$	
9	How was a	mployment compensation. Enter the ever, if you contend that unemploying a benefit under the Social Security Amn A or B, but instead state the amo	nent compensa Act, do not list	tion receive the amount	d by you or your spouse				
	clai	employment compensation imed to be a benefit under the cial Security Act	Debtor \$		Spouse \$			\$	

B22A (Offici	al Form 22A) (Chapter 7) (12/08)		*****				
10	source paid alim Secu	me from all other sources. Specify source and amount. If necessary, less on a separate page. Do not include alimony or separate maintenaby your spouse if Column B is completed, but include all other paony or separate maintenance. Do not include any benefits received unity Act or payments received as a victim of a war crime, crime against tim of international or domestic terrorism.	ance pay yments ander the	yments of Social			WIND COLUMN TO THE COLUMN THE COLUMN TO THE	
	a.	Radio Endorsements	\$	200.00				
	b.		\$					
	Tot	tal and enter on Line 10			\$	200.00	\$	
11		total of Current Monthly Income for § 707(b)(7). Add Lines 3 thru if Column B is completed, add Lines 3 through 10 in Column B. Enter			\$	2,450.00	\$	4,253.00
12	Line	Al Current Monthly Income for § 707(b)(7). If Column B has been con 11, Column A to Line 11, Column B, and enter the total. If Column B pleted, enter the amount from Line 11, Column A.			\$			6,703.00
		Part III. APPLICATION OF § 707(B)(7)	EXCL	USION				
13		ualized Current Monthly Income for § 707(b)(7). Multiply the amound enter the result.	unt from	Line 12 b	y the	number	\$	80,436.00
14	hous	licable median family income. Enter the median family income for the sehold size. (This information is available by family size at www.usdoj.oankruptcy.court.)				erk of		
	a. Er	nter debtor's state of residence: California b. Ent	er debto	r's househ	old s	ize: 4	\$	79,971.00
15		lication of Section707(b)(7). Check the applicable box and proceed as The amount on Line 13 is less than or equal to the amount on Line not arise" at the top of page 1 of this statement, and complete Part VIII The amount on Line 13 is more than the amount on Line 14. Comp	14. Che	ck the box complete	Parts	IV, V, VI,	or V	II.
		Complete Parts IV. V. VI. and VII of this statement or						nt.

,		Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)	
16	Ente	r the amount from Line 12.	\$ 6,703.00
17	Line debto paym debto	Ital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the or's dependents. Specify in the lines below the basis for excluding the Column B income (such as tent of the spouse's tax liability or the spouse's support of persons other than the debtor or the or's dependents) and the amount of income devoted to each purpose. If necessary, list additional tents on a separate page. If you did not check box at Line 2.c, enter zero.	
	a.	\$	
	b.	\$	
	c.	\$	
	Tot	al and enter on Line 17.	\$
18	Curi	rent monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$ 6,703.00
		Part V. CALCULATION OF DEDUCTIONS FROM INCOME	
		Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)	
19A	Natio	onal Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS onal Standards for Food, Clothing and Other Items for the applicable household size. (This information allable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$ 1,370.00

19B	Nation Out-co Out-co www. your house the nu memb house health	onal Standards: health care. In of-Pocket Health Care for person of-Pocket Health Care for person usdoj.gov/ust/ or from the clerkhousehold who are under 65 years of age of umber stated in Line 14b.) Multipers under 65, and enter the reservoid members 65 and older, are care amount, and enter the reservoid members 65 and enter the	Enter in Line al bons under 65 years of age k of the bankrupto ars of age, and en older. (The total tiply Line al by Lult in Line cl. Mud enter the result sult in Line 19B.	s of age e or old cy counter in l l numb ine bl in Line	e, and in Line and der. (This infort.) Enter in Li Line b2 the number of household to obtain a tot Line a2 by Line c2. Add Line	a2 the IRS Nation rmation is availanted the number of member and members mustal amount for home b2 to obtain a ses c1 and c2 to o	onal Standards for tible at or of members of rs of your t be the same as busehold total amount for btain a total	desired was the street resident and position and position of the street, and	
	l	isehold members under 65 ye			T	ers 65 years of	1		
	al.	Allowance per member	60.00	a2.	Allowance p	· · · · · · · · · · · · · · · · · · ·	144.00		
	b1.	Number of members	4	b2.	Number of 1	nembers	0		
	c1.	Subtotal	240.00	c2.	Subtotal		0.00	\$	240.00
20A	and U inform	I Standards: housing and util Utilities Standards; non-mortgage mation is available at www.usd	ge expenses for the oj.gov/ust/ or from	e appli n the c	cable county a lerk of the ban	and household si kruptcy court).	ze. (This	\$	559.00
200	the IR informathe to	I Standards: housing and utiles Housing and Utilities Standarnation is available at www.usde tal of the Average Monthly Payact Line b from Line a and enter	ards; mortgage/renoj.gov/ust/ or from ments for any de	nt expe n the c bts sec	ense for your clerk of the ban aured by your h	ounty and family kruptcy court); one, as stated in	y size (this enter on Line b n Line 42;		
20B	a.	IRS Housing and Utilities Star	ndards; mortgage/	/rental	expense	\$	1,045.00		
	b.	Average Monthly Payment for any, as stated in Line 42	r any debts secure	d by y	our home, if	\$			
	c.	Net mortgage/rental expense				Subtract Line l	b from Line a	\$	1,045.00
21	and 2 Utiliti	Standards: housing and utile OB does not accurately computies Standards, enter any additional contention in the space below.	e the allowance to nal amount to wh	o which	h you are entit	led under the IR	S Housing and	\$	
	an ex	Standards: transportation; pense allowance in this categore gardless of whether you use pu	y regardless of wl	hether					
22A	Check expen	the number of vehicles for whases are included as a contribution of the contribution o	nich you pay the o	peratir hold ex	spenses in Line	e 8.	. U		
	Trans Local Statis	n checked 0, enter on Line 22A portation. If you checked 1 or 2 Standards: Transportation for tical Area or Census Region. (To bankruptcy court.)	2 or more, enter o the applicable nu	n Line mber o	22A the "Ope f vehicles in the	erating Costs" an ne applicable Me	nount from IRS etropolitan	\$	211.00
22B	expen additi Trans	Standards: transportation; asses for a vehicle and also use pronal deduction for your public portation" amount from IRS Lousdoj.gov/ust/ or from the cleri	oublic transportati transportation expocal Standards: To	on, and penses ranspo	d you contend , enter on Line rtation. (This a	that you are enti	tled to an	\$	
	<u> </u>	usus citi in in citi	v or me pankrubit	Jy COUI	,			ΙΦ	

Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	B22A (Officia	al Form 22A) (Chapter 7) (12/08)			
Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at yaww.usbig.jogv/usg/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 42; c. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you ebecked the "2 or more" Box in Line 23; Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/usg/ or from the clerk of the bankruptey court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. b. Stated in Line 42. c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a part deter the result in Line 24. Do not enter an amount less than zero. Cher Necessary Expenses: and Medicare taxes. Do not include promet contributions, union dues, and uniform costs. Do not include discretionary amounts, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as syouwatery dependents, for whole life or far any other form of insurance. Enter total average monthly payment and security pay for term life insurance for yourself. Do not include promets on past due obligations included in Line 44. Other Necessary		which than	h you claim an ownership/lease expense. (You may not claim an ownertwo vehicles.)		C III	
Transportation (available at www.usdoj.gov/us/) or from the clerk of the bankruptcy court); enter in Line be subtract Line in from Line a and enter the result in Line 23. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs S 489.00 Average Monthly Payment for any debts secured by Vehicle 1, as S Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/us/) or from the clerk of the bankruptcy court); enter in Line be the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24, Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs, Second Car S Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24, Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs, Second Car S S S S S S S S S		1	2 or more.			
Average Monthly Payment for any debts secured by Vehicle 1, as S	23	Trans the to	sportation (available at www.usdoj.gov/ust/ or from the clerk of the botal of the Average Monthly Payments for any debts secured by Vehic	ankruptcy court); enter in Line b le 1, as stated in Line 42;		
Average Monthly Payment for any debts secured by Vehicle 1, as subtract Line b from Line a checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov)tsst/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car \$ Average Monthly Payment for any debts secured by Vehicle 2, as \$ that the Line 42. b. stated in Line 42. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include a testate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 40Hg) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: clucation for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nu		a.	IRS Transportation Standards, Ownership Costs	\$ 489.00]	
Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www usedoj go/wlag/ or from the clerk of the bankruptcy court); enter in Line be the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42; c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: life insurance for employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(8) contributions. Other Necessary Expenses: life insurance. Enter total average monthly paymont by the mount of the support payments. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educationa		b.	Average Monthly Payment for any debts secured by Vehicle 1, as	\$		
checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/usg/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42. C. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly pay for term life insurance for your employment, such as retriement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you actually pay for term life insurance for yourself. Do not include premiums on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Othe		c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a		489.00
Transportation (available at <u>xww.usdoi.gov/ust/</u> or from the clerk of the bankruptcy court); enter in Line be the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs, Second Car Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 42. c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actuall				Complete this Line only if you		-
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Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 42 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savin		a.	IRS Transportation Standards, Ownership Costs, Second Car	\$	7	
Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare much as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		b.	Average Monthly Payment for any debts secured by Vehicle 2, as	\$		
federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. 795.90 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.		c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	$] _{\$}$	
payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for tel	25	feder	al, state, and local taxes, other than real estate and sales taxes, such a	s income taxes, self employment		795.90
for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 150.00	26	payro	oll deductions that are required for your employment, such as retireme	ent contributions, union dues,	\$	443.32
required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 150.00	27	for te	erm life insurance for yourself. Do not include premiums for insural		\$	
child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 1,000.00 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 150.00	28	requi	red to pay pursuant to the order of a court or administrative agency, s	such as spousal or child support	\$	
on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 1,000.00	29	child empl	l. Enter the total average monthly amount that you actually expend for oyment and for education that is required for a physically or mentally	r education that is a condition of		
expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 150.00	30	on cl	nildcare — such as baby-sitting, day care, nursery and preschool. Do		\$	1,000.00
you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. \$ 150.00	31	expe reim	nd on health care that is required for the health and welfare of yoursel bursed by insurance or paid by a health savings account, and that is in	If or your dependents, that is not excess of the amount entered in	ı	
	32	you a servi neces	actually pay for telecommunication services other than your basic honce — such as pagers, call waiting, caller id, special long distance, or issary for your health and welfare or that of your dependents. Do not i	ne telephone and cell phone internet service — to the extent		150.00
	33			19 through 32.	\$	6,303.22

B22A (Official Form 22A) (Chapter 7) (12/08)

			Additional Living Expense Deductions ny expenses that you have listed in Lines 19-32	
	expe		d Health Savings Account Expenses. List the monthly below that are reasonably necessary for yourself, your	y
	a.	Health Insurance	\$ 418.00	
24	b.	Disability Insurance	\$	
34	c.	Health Savings Account	\$	
	Tota	l and enter on Line 34	•	\$ 418.00
		ou do not actually expend this total amo pace below:	ount, state your actual total average monthly expenditu	res in
35	mon elder	thly expenses that you will continue to pa	sehold or family members. Enter the total average act by for the reasonable and necessary care and support of your household or member of your immediate family	an
36	you a Serv	actually incurred to maintain the safety of	e total average reasonably necessary monthly expenses f your family under the Family Violence Prevention and The nature of these expenses is required to be kept	
37	Loca prov	al Standards for Housing and Utilities, that	nonthly amount, in excess of the allowance specified by at you actually expend for home energy costs. You must ion of your actual expenses, and you must demonstronable and necessary.	st
38	you a secon	actually incur, not to exceed \$137.50 per ndary school by your dependent children	less than 18. Enter the total average monthly expense child, for attendance at a private or public elementary cless than 18 years of age. You must provide your cas expenses, and you must explain why the amount clay accounted for in the IRS Standards.	or e
39	cloth Nation	ning expenses exceed the combined allow onal Standards, not to exceed 5% of those	r the total average monthly amount by which your food ances for food and clothing (apparel and services) in the combined allowances. (This information is available ankruptcy court.) You must demonstrate that the and necessary.	ne IRS
40			the amount that you will continue to contribute in the forganization as defined in 26 U.S.C. § 170(c)(1)-(2).	orm of \$
41	Tota	al Additional Expense Deductions unde	er § 707(b). Enter the total of Lines 34 through 40	\$ 418.00

Name of Creditor	you of Payn the to follo	own, list the name of the cre nent, and check whether the total of all amounts schedule wing the filing of the bankru. Enter the total of the Avera	ditor, identify the payment included as contractual uptcy case, divide	he property securing les taxes or insuranc ly due to each Secur ded by 60. If necessa	the debt, state the A e. The Average Mor red Creditor in the 6	Average Monthly nthly Payment is 0 months	
b. S yes no		Name of Creditor	Property	Securing the Debt	Monthly	include taxes or	
C. Stere payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor	a.				\$	☐ yes ☐ no	
Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor	b.				\$	☐ yes ☐ no	
Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. S. Total: Add lines a, b and c. Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b	c.				\$	☐ yes ☐ no	
Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor				Total: Ac	ld lines a, b and c.		
a.	cure forec	amount would include any solosure. List and total any su	ums in default	that must be paid in	order to avoid repos	ssession or litional entries on a	·
b.		Name of Creditor		Property Securing	the Debt	1	
C. S Total: Add lines a, b and c. S Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. S Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. \$ b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X c. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b \$	a.					\$	
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b	b.	×				\$	
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b	c.					\$	
such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b					Total: Ac	ld lines a, b and c.	\$
following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b	such	as priority tax, child suppor	t and alimony o	claims, for which you	u were liable at the t	ime of your	\$
b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 Total: Multiply Lines a and b	follo	wing chart, multiply the am					
schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b	a.	Projected average monthly	chapter 13 pla	n payment.	\$		
case and b	b.	schedules issued by the Ex Trustees. (This information www.usdoj.gov/ust/ or from	ecutive Office n is available a	for United States t	X		
Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.	c.		rative expense	of chapter 13	,	nes a	\$
	 	I Dadwatiana fan Dakt Daw	mant Entantha	total of Linea 42 th	rough 45		· ·

	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION)N		
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))		\$	6,703.00
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))		\$	6,721.22
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the	e result.	\$	0.00
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the nu enter the result.	mber 60 and	\$	0.00
	Initial presumption determination. Check the applicable box and proceed as directed.			
	The amount on Line 51 is less than \$6,575. Check the box for "The presumption does this statement, and complete the verification in Part VIII. Do not complete the remainde		top o	f page 1 of
52	The amount set forth on Line 51 is more than \$10,950. Check the box for "The presu 1 of this statement, and complete the verification in Part VIII. You may also complete P remainder of Part VI.			
	The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the though 55).	remainder of Par	t VI (Lines 53
53	Enter the amount of your total non-priority unsecured debt		\$	
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and result.	enter the	\$	
	Secondary presumption determination. Check the applicable box and proceed as directed			•
55	The amount on Line 51 is less than the amount on Line 54. Check the box for "The part the top of page 1 of this statement, and complete the verification in Part VIII.	resumption doe	s not a	arise" at
1	The amount on Line 51 is equal to or greater than the amount on Line 54. Check the arises" at the top of page 1 of this statement, and complete the verification in Part VIII. VII.			
	Part VII. ADDITIONAL EXPENSE CLAIMS			
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, and welfare of you and your family and that you contend should be an additional deduction income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page average monthly expense for each item. Total the expenses.	from your currer	ıt mor	nthly
۔ ا	Expense Description	Monthly A	moun	ıt
56	a.	\$		
	b.	\$		
	c.	\$		
	Total: Add Lines a, b and c	\$		
	Part VIII. VERIFICATION			
	I declare under penalty of perjury that the information provided in this statement is true and both debtors must sign.)	correct. (If this a	i joini	t case,
57	Date: July 21, 2009 Signature: (Pebtor)		***************************************	

United States Bankruptcy Court Eastern District of California

IN RE:	Case No.
Ray, Matthew Cory & Ray, Laura Elizabeth	Chapter 7
Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 19,708.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 60,428.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 5,208.28
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 6,185.00
	TOTAL	15	\$ 19,708.00	\$ 60,428.00	

United States Bankruptcy Court Eastern District of California

Eastern District of California				
IN RE:	ase No.		ranora de la compania de la compani	anhone
	Chapter 7			***************************************
Debtor(s) STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELAT	ED DAT	ΓΑ <i>(28</i> ΤΙ.S. <i>(</i>	~ 8 1 5	9)
If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below	(8) of the	·	•	-
Check this box if you are an individual debtor whose debts are NOT primarily consumer of information here.	lebts. Yo	u are not requ	ired to	report any
This information is for statistical purposes only under 28 U.S.C. § 159.				
Summarize the following types of liabilities, as reported in the Schedules, and total them.				
Type of Liability		Amount		
Domestic Support Obligations (from Schedule E)	\$	0.00		
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00		
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (wheth disputed or undisputed)	ner \$	0.00		
Student Loan Obligations (from Schedule F)	\$	0.00		
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00		
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00		
TOTA	AL \$	0.00		
State the following:				
Average Income (from Schedule I, Line 16)	\$	5,208.28		
Average Expenses (from Schedule J, Line 18)	\$	6,185.00		
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$	6,703.00		
State the following:				
1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column			\$	0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$	0.00		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			\$	0.00
4. Total from Schedule F			\$ (30.428.00

60,428.00

5. Total of non-priority unsecured debt (sum of 1, 3, and 4)

IN R	RE.	Rav.	Matthew	Corv	&	Rav.	Laura	Elizab	et	h
------	-----	------	---------	------	---	------	-------	--------	----	---

Debton	S

Case	No

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
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TOTAL

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(Report also on Summary of Schedules)

IN RE Ray, Matthew Cory & Ray, Laura Elizabeth

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(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

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	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and		Checking Account Tri Counties Bank Account No. 5921	С	2,473.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account Bank of America Account No. ****0417	С	0.00
			Savings Account Tri Counties Bank Account No. ****4978	С	95.00
			Savings Account Bank of America Account No. ****0252	С	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	х			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Household goods and furnishings	С	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Clothing	С	300.00
7.	Furs and jewelry.		Jewelry	С	300.00
8.	Firearms and sports, photographic, and other hobby equipment.		Hobbie and sports equipment	С	180.00
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issue.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
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SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

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	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans.		Cal STRS Defined Benefit Program IRA	С	8,221.00
	Give particulars.		Defined Benefit Supplemental Account IRA	С	2,755.00
			Roth IRA Vanguard	С	1,579.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	×			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			,
16.	Accounts receivable.	Х			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	Х			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			,
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		1996 Geo Prizm Sedan 85,000 miles fair condition	С	1,650.00
			2000 Ford Taurus LX Sedan 150000 miles	С	1,155.00
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Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

26. Boats, motors, and accessories. 27. Aircraft and accessories. 28. Office equipment, furnishings, and applies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 22. Crops - growing or harvested. Give particulars. 33. Parming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize. X X		TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
27. Aircraft and accessories. 28. Office equipment, furnishings, and supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.				fair condition		
28. Office equipment, furnishings, and supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.						
supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.				·		
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0 continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

Check if debtor claims a homestead exemption that exceeds \$136,875.

☐ 11 U.S.C. § 522(b)(2) ▼11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Checking Account Fri Counties Bank Account No. 5921	CCCP § 703.140(b)(5)	2,473.00	2,473.0
Savings Account Fri Counties Bank Account No. ****4978	CCCP § 703.140(b)(5)	95.00	95.00
lousehold goods and furnishings	CCCP § 703.140(b)(3)	1,000.00	1,000.0
Clothing	CCCP § 703.140(b)(3)	300.00	300.0
Jewelry	CCCP § 703.140(b)(4)	300.00	300.0
lobbie and sports equipment	CCCP § 703.140(b)(3)	180.00	180.0
Cal STRS Defined Benefit Program RA	CCCP § 703.140(b)(10)(E)	8,221.00	8,221.0
Defined Benefit Supplemental Account RA	CCCP § 703.140(b)(10)(E)	2,755.00	2,755.0
Roth IRA Vanguard	CCCP § 703.140(b)(10)(E)	1,579.00	1,579.0
996 Geo Prizm Sedan 5,000 miles air condition	CCCP § 703.140(b)(2)	1,650.00	1,650.0
000 Ford Taurus LX Sedan 50000 miles air condition	CCCP § 703.140(b)(5)	1,155.00	1,155.0
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SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED. NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
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							Schedules.)	Summary of Certain

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IN RE Ray, Matthew Cory & Ray, Laura Elizabeth

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also contain the Statistical Summary of Certain Liabilities and Related Data.	
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)	
Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 1 U.S.C. § 507(a)(1).	
Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).	те
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifyin independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).	
Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).	ne
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).	
Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, the were not delivered or provided. 11 U.S.C. § 507(a)(7).	at
Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).	
Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governor of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9)	
Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcoho a drug, or another substance. 11 U.S.C. § 507(a)(10).	ol,
* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.	
0 continuation sheets attached	

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(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1094		С	charge account		T		
Bank Of America PO Box 15026 Wilmington, DE 19886		THE THEORY OF PERSONS ASSESSMENT OF THE PERSONS ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSME					3,059.00
ACCOUNT NO. 6722	\top	С	charge account	H	+	+	3,039.00
Bank Of America PO Box 851001 Dallas, TX 75285-1001		**************************************					29,838.00
ACCOUNT NO. 7721	\top	С	charge account	H	+	十	20,000.00
Citi Cards PO Box 6940 The Lakes, NV 88901-6940							24,341.00
ACCOUNT NO. 5038		С	charge account	Ħ	\top	\top	
New York And Company PO Box 659728 San Antonio, TX 78265-9728							453.00
		L		Subt	ota!	+	+33.00
1 continuation sheets attached			(Total of th	is pa	ıge)) [§	57,691.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate	also atist	ical	l I	

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		- (1	Continuation Sneet)				
CREDITOR'S NAME. MAILING ADDRESS INCLUDING ZIP CODE. AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0927	-	С	student loan		_		
US Department Of Education PO Box 5609 Greenville, TX 75403-5609			Student Ioan				2,737.00
ACCOUNT NO.	_	-				Н	2,737.00
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ACCOUNT NO.							
Sheet no1 of1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the		age	;)	\$ 2,737.00
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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases. DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST.
STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY.
STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT Loretta Weber Rental Home (12 months) 369 Silver Lake Drive Chico, CA 95973

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SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR			
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u ase	NO.

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current

Debtor's Marital Status Married		DEPENDENTS OF DEBTOR AND SPOUSE						
		RELATIONSHIP(S): Daughter Daughter				AGE(S) 4.5 19mo.		
EMPLOYMENT:		DEBTOR			SPOUSE			
Occupation Name of Employer How long employed Address of Employer	News Director Deer Creek E 4 years 2654 Cramer Chico, CA 9	Broadcasting Drive	Resource S Tehema Co 4 years PO Box 689 Red Bluff, 0	unty Depa	eacher rtment Of Ed	ucation	1	
INCOME: (Estima	ate of average o	r projected monthly income at tir	ne case filed)		DEBTOR		SPOUSE	
•	gross wages, sa	alary, and commissions (prorate in		\$ \$	2,437.50		4,253.00	
3. SUBTOTAL				\$	2,437.50	\$	4,253.00	
4. LESS PAYROLa. Payroll taxes ab. Insurancec. Union duesd. Other (specify)	nd Social Secu	rity		\$ \$ \$ \$	325.00	\$ \$ \$	495.90 418.00 71.32 372.00	
5. SUBTOTAL O	F PAVROLL I	DEDUCTIONS		\$ s	325.00	\$	1,357.22	
6. TOTAL NET N				\$	2,112.50	***************************************	2,895.78	
8. Income from rea 9. Interest and divide	l property dends	of business or profession or farm		\$ \$		\$		
that of dependents 11. Social Security	listed above or other govern	nment assistance		\$		\$		
12. Pension or retir				\$ \$ \$		\$ \$ \$		
13. Other monthly (Specify) Radio	income			\$\$ \$\$	200.00	\$ \$ \$		
14. SUBTOTAL (OF LINES 7 TI	HROUGH 13		\$	200.00	\$		
		COME (Add amounts shown on l	ines 6 and 14)	\$	2,312.50		2,895.78	
16 COMBINED	AVERAGE M	ONTHLY INCOME: (Combine	column totals from lin	₂ 15·				

\$ 200.00	\$
\$ 2,312.50	\$ 2,895.78

if there is only one debtor repeat total reported on line 15)

\$ 5,208,28	

(Report also on Summary of Schedules and, if applicable, on

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

\mathbf{IN}	RE	Ray.	Matthew	Cory	&	Ray,	Laura	Elizabeth
---------------	----	------	---------	------	---	------	-------	-----------

Debtor(s)

C	T 1	Γ_
Case	1	IO.

(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly,
quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed
on Form22A or 22C.

Theck this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? Yes No	\$	700.00
b. Is property insurance included? Yes No		
2. Utilities:	Ф	
a. Electricity and heating fuel	\$	100.00
b. Water and sewer	\$	
c. Telephone	\$	70.00
d. Other Cable Television	\$	110.00
	\$	
3. Home maintenance (repairs and upkeep)	\$	25.00
4. Food	\$	400.00
5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	
7. Medical and dental expenses	\$	95.00
8. Transportation (not including car payments)	\$	300.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health	\$	
d. Auto	\$	50.00
e. Other	\$	
	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	
	\$	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other		
	\$	······
14. Alimony, maintenance, and support paid to others	\$	
15. Payments for support of additional dependents not living at your home	\$	***************************************
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other Child Care	\$	500.00
17. Olliot	¢	
	\$	***************************************
	Ψ	······································
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if	 	
annlicable on the Statistical Summary of Certain Liabilities and Related Data	g	2 400 00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None**

20. STATEMENT OF MONTHLY NET INCOME

- a. Average monthly income from Line 15 of Schedule Ib. Average monthly expenses from Line 18 above
- c. Monthly net income (a. minus b.)

2,312.50

2,400.00

-87.5

IN RE Ray, Matthew Cory & Ray, Laura Eliza
--

c. Monthly net income (a. minus b.)

Debtor(s)

0	ът
Case	NO.

(If known)

3,785.00 -889.22

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR	(S)
Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the de on Form22A or 22C.	e any payments made biweekly, ductions from income allowed
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete	a separate schedule of
expenditures labeled "Spouse."	
	SPOUSE
1. Rent or home mortgage payment (include lot rented for mobile home)	\$1,200.00
a. Are real estate taxes included? Yes No	
b. Is property insurance included? Yes No	
2. Utilities:	
a. Electricity and heating fuel	\$ 150.00
b. Water and sewer	\$ 45.00
c. Telephone	\$140.00
d. Other See Schedule Attached	\$\$
	5
3. Home maintenance (repairs and upkeep)	\$ 50.00
4. Food	\$ 600.00
5. Clothing	\$ <u>150.00</u>
6. Laundry and dry cleaning	\$ 25.00
7. Medical and dental expenses	\$ 50.00
8. Transportation (not including car payments)	\$ 400.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions	\$84.00
	D
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's	¢ 25.00
b. Life	\$
c. Health	Ф
d. Auto	\$ \$131.00
e. Other	\$\$
	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	Ψ
(Specify)	\$
(Openity)	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$
b. Other	
J. Culor	\$
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
17. Other Child Care	\$ 500.00
	\$
	\$
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if	
applicable, on the Statistical Summary of Certain Liabilities and Related Data.	\$ 3,785.00
The state of the s	
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of	of this document
None	of this document.
HOILO	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 2,895.78
b. Average monthly expenses from Line 18 above	\$ 2,095.70
o. Average monthly expenses from time to above	Ψ <u>3,703.00</u>

M	RE	Rav.	Matthew	Corv	&	Rav.	Laura	Elizal	oet	h

Case No.

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Continuation Sheet - Page 1 of 1

Other Utilities (SPOUSE)
Garbage
Mobile Phone
Cable Television

35.00

125.00

75.00

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IN RE Ray, Matthew Cory & Ray, Laura Elizabeth

Debtor(s)

Case	У.	_
Lase	11	().

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury true and correct to the best of my			consisting of	16 sheets, and that they are
Date: July 21, 2009	Signature: Matthew	Cory Ray		Debtor
Date: July 21, 2009	Signature: Laura Eliz	zabeth Ray	[If joint o	(Joint Debtor, if any) ase, both spouses must sign.]
DECLARATION AND SI	GNATURE OF NON-ATTORN	NEY BANKRUPTCY PETITI	ION PREPARER (See 11 U.S.C. § 110)
I declare under penalty of perjury the compensation and have provided the cand 342 (b); and, (3) if rules or guide bankruptcy petition preparers, I have gany fee from the debtor, as required by	debtor with a copy of this documelines have been promulgated pgiven the debtor notice of the ma	nent and the notices and informursuant to 11 U.S.C. § 110(h)	nation required und) setting a maximum	der 11 U.S.C. §§ 110(b), 110(h), m fee for services chargeable by
Printed or Typed Name and Title, if any, or If the bankruptcy petition preparer is responsible person, or partner who si	s not an individual, state the no	ame, title (if any), address, a		o. (Required by 11 U.S.C. § 110.) number of the officer, principal,
Address				
Signature of Bankruptcy Petition Preparer		MINI MACINIAN DI CONTROL CO MONTO DE CONTROL C	Date	
Names and Social Security numbers o is not an individual:	fall other individuals who prepa	red or assisted in preparing th	is document, unless	the bankruptcy petition preparer
If more than one person prepared this. A bankruptcy petition preparer's fails imprisonment or both. 11 U.S.C. § 1	ure to comply with the provision			
DECLARATION UNI	DER PENALTY OF PERJU	RY ON BEHALF OF COF	RPORATION OR	R PARTNERSHIP
I, the	(th	ne president or other officer	r or an authorized	l agent of the corporation or a
member or an authorized agent of (corporation or partnership) name schedules, consisting of knowledge, information, and believed.	_ sheets (total shown on sun	lare under penalty of perjunation of perjunation and the large plus 1), and the	ry that I have rea	d the foregoing summary and and correct to the best of my
Date:	Signature:		***************************************	
	WALLAND WALLAN	NAMES AND ASSOCIATION OF THE STATE OF THE ST	(Print or ty	pe name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

United States Bankruptcy Court Eastern District of California

IN RE:	RE: Case No	
Ray, Matthew Cory	& Ray, Laura Elizabeth	Chapter 7
	Debtor(s)	1
	STATEMENT OF FINANCIAL	L AFFAIRS
is combined. If the cas is filed, unless the spo farmer, or self-employ personal affairs. To in	be completed by every debtor. Spouses filing a joint petition may find it is filed under chapter 12 or chapter 13, a married debtor must furned uses are separated and a joint petition is not filed. An individual dead professional, should provide the information requested on this standicate payments, transfers and the like to minor children, state the A.B., a minor child, by John Doe, guardian." Do not disclose the ch	nish information for both spouses whether or not a joint petition debtor engaged in business as a sole proprietor, partner, family tatement concerning all such activities as well as the individual's e child's initials and the name and address of the child's parent
25. If the answer to a	to be completed by all debtors. Debtors that are or have been in a pplicable question is "None," mark the box labeled "None at the sheet properly identified with the case name, case number (if keeps).	" If additional space is needed for the answer to any question,
	DEFINITIONS	
for the purpose of this an officer, director, ma partner, of a partnership	otor is "in business" for the purpose of this form if the debtor is a conform if the debtor is or has been, within six years immediately premaging executive, or owner of 5 percent or more of the voting or exp; a sole proprietor or self-employed full-time or part-time. An indiges in a trade, business, or other activity, other than as an employee	eceding the filing of this bankruptcy case, any of the following: equity securities of a corporation; a partner, other than a limited dividual debtor also may be "in business" for the purpose of this
which the debtor is an	"insider" includes but is not limited to: relatives of the debtor; ge officer, director, or person in control; officers, directors, and any their relatives; affiliates of the debtor and insiders of such affiliates.	owner of 5 percent or more of the voting or equity securities of
1. Income from empl	oyment or operation of business	
None State the gross including part-t case was comm maintains, or he beginning and e	amount of income the debtor has received from employment, traime activities either as an employee or in independent trade or but enced. State also the gross amounts received during the two yeas maintained, financial records on the basis of a fiscal rather the ending dates of the debtor's fiscal year.) If a joint petition is filed, so 2 or chapter 13 must state income of both spouses whether or not	siness, from the beginning of this calendar year to the date this ears immediately preceding this calendar year. (A debtor that an a calendar year may report fiscal year income. Identify the state income for each spouse separately. (Married debtors filing
AMOUNT 12.750.00	SOURCE YTD Income from employment (debtor)	
	YTD Income from employment (codebtor)	
	2008 Income from employment (debtor)	
	2008 Income from employement (codebtor)	
	2007 Income from employment (debtor)	
39,682.00	2007 Income from employment (codebtor)	
2. Income other than	from employment or operation of business	
two years imm separately. (Ma	at of income received by the debtor other than from employment, and ediately preceding the commencement of this case. Give particularized debtors filing under chapter 12 or chapter 13 must state inconseparated and a joint petition is not filed.)	ulars. If a joint petition is filed, state income for each spouse
	SOURCE YTD Income from Radio Endorsements	

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	yments to creditors plete a. or b., as appropriate, and c.			
None	a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property the constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a join petition is filed, unless the spouses are separated and a joint petition is not filed.)			of all property that litor on account of dgeting and credit
Bank PO E	ME AND ADDRESS OF CREDITOR k Of America Box 851001 as, TX 75285-1001	DATES OF PAYMENTS May 30, 2009	AMOUNT PAID 635.00	AMOUNT STILL OWING 29,000.00
None	preceding the commencement of the case \$5,475. If the debtor is an individual, indicabligation or as part of an alternative repayr.	consumer debts: List each payment or other transfer to a unless the aggregate value of all property that constitut cate with an asterisk (*) any payments that were made the nent schedule under a plan by an approved nonprofit bud 13 must include payments and other transfers by either and a joint petition is not filed.)	tes or is affected by such tr o a creditor on account of a lgeting and credit counseling	ransfer is less than a domestic support g agency. (Married
None	of the debitors. Dist an payments made within one year ininicalately preceding the commencement of this case to of for the benefit of creation			
4. Su	its and administrative proceedings, execut	tions, garnishments and attachments		
None	and best and administrative proceedings to which the dector is or was a party within one year infinitediately proceeding the fining of this			g the filing of this pouses whether or
None	b. Describe an property that has been attached, garmaned or scized and of any regal or equitable process within one year infinediately preceding			
5. Re	possessions, foreclosures and returns			THE RESERVE THE PROPERTY OF TH
None	List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)			or chapter 13 must
6. As	signments and receiverships			E NATURAL COMP.
None	a. Describe any assignment of property for (Married debtors filing under chapter 12 or unless the spouses are separated and joint parts of the spouses are spouses ar	the benefit of creditors made within 120 days immediate chapter 13 must include any assignment by either or both petition is not filed.)	ely preceding the commenc spouses whether or not a jo	ement of this case. int petition is filed,
None	commencement of this case. (Married debto	nands of a custodian, receiver, or court-appointed officiants of a custodian, receiver, or court-appointed official or stilling under chapter 12 or chapter 13 must include infalled, unless the spouses are separated and a joint petition	ormation concerning proper	ately preceding the
7. Git	fts			A THE STREET WAY AND STREET SHOWING THE STREET
None	gifts to family members aggregating less that per recipient. (Married debtors filing under	ide within one year immediately preceding the commen an \$200 in value per individual family member and charing the chapter 12 or chapter 13 must include gifts or contributions are separated and a joint petition is not filed.	table contributions aggregate	ting less than \$100

8. Losses

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

10. O	ther transfers			
None	absolutely or as security within two years imme	ediately preceding the commencement	usiness or financial affairs of the debtor, transferred either of this case. (Married debtors filing under chapter 12 or tion is filed, unless the spouses are separated and a joint	
None	b. List all property transferred by the debtor within device of which the debtor is a beneficiary.	in ten years immediately preceding the	commencement of this case to a self-settled trust or similar	
11. C	1. Closed financial accounts			
None None 12. S None 14. P	List an intalicial accounts and instruments field in the name of the debtor of the debtor which were closed, sold, or extension			
12. S	2. Safe deposit boxes			
None 🗹	_ Elst each safe appoint of other box of appointer; in which the decitor has of had beautified, each, or other variations within one just immediately			
13. S	etoffs			
None	List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)			
14. P	4. Property held for another person			
None	Bist an property owned by another person that the debter notes of controls.			
15. P	15. Prior address of debtor			
None	If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.			
	RESS 6 Ceanothus Ave. Chico, CA 95973	NAME USED Ray	DATES OF OCCUPANCY July 2006 to February 2008	
16. S	pouses and Former Spouses			
None	ne If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana			

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement

June 2009

DATE OF PAYMENT, NAME OF

PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION

AND VALUE OF PROPERTY

1,500.00

9. Payments related to debt counseling or bankruptcy

of this case.

Douglas B. Jacobs

20 Independence Circle Chico, CA 95973

NAME AND ADDRESS OF PAYEE

Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: July 21, 2009

Signature

of Debtor

Matthew Cory Ray

Date: July 21, 2009

Signature

of Joint Debtor

(if any)

Laura Elizabeth Ray

______0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

United States Bankruptcy Court Eastern District of California

IN RE:		(Case No
Ray, Matthew Cory & Ray, Laura Elizabeth		Chapter 7	
Debtor	r(s)		
CHAPTER 7 INDI	VIDUAL DEBTO	R'S STATEMENT OF	FINTENTION
PART A – Debts secured by property of the es estate. Attach additional pages if necessary.)	tate. (Part A must be	fully completed for EACH	I debt which is secured by property of the
Property No. 1			
Creditor's Name:		Describe Property Securing Debt:	
Property will be <i>(check one)</i> : Surrendered Retained			
If retaining the property, I intend to (check at Redeem the property Reaffirm the debt Other. Explain	least one):	(for examp	le, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one): Claimed as exempt Not claimed as exempt	exempt		
Property No. 2 (if necessary)			
Creditor's Name:		Describe Property Securing Debt:	
Property will be <i>(check one)</i> : Surrendered Retained			
If retaining the property, I intend to (check at Redeem the property Reaffirm the debt Other. Explain	least one):	(for examp	le, avoid lien using 11 U.S.C. § 522(f)).
Property is <i>(check one)</i> : Claimed as exempt Not claimed as exempt	exempt		
PART B – Personal property subject to unexpir additional pages if necessary.)	ed leases. (All three c	columns of Part B must be c	ompleted for each unexpired lease. Attach
Property No. 1	7		
Lessor's Name:	Describe Leased Property:		Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No
Property No. 2 (if necessary)			
Lessor's Name: Describe L		Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No
continuation sheets attached (if any)			
I declare under penalty of perjury that the		intention as to any prope	erty of my estate securing a debt and/or
personal property subject to an unexpired le Date: July 21, 2009	signature of Deptor	10	
	Signature of Joint D	ebtor 87	

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United States Bankruptcy Court Eastern District of California

IN	IN RE:	Case No	
Ra	Ray, Matthew Cory & Ray, Laura Elizabeth	Chapter 7	
	Debtor(s)		
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services of or in connection with the bankruptcy case is as follows:	or the above-named debtor(s) and that compensation rendered or to be rendered on behalf of the debtor(s)	n paid to me within s) in contemplation
	For legal services, I have agreed to accept	\$	1,500.00
	Prior to the filing of this statement I have received	\$	1,500.00
	Balance Due	\$	0.00
2.	2. The source of the compensation paid to me was: Debtor Dother (specify):		
3.	3. The source of compensation to be paid to me is: Debtor Other (specify):		
4.	1. I have not agreed to share the above-disclosed compensation with any other person unless	they are members and associates of my law firm.	
	I have agreed to share the above-disclosed compensation with a person or persons who are together with a list of the names of the people sharing in the compensation, is attached.	e not members or associates of my law firm. A cop	y of the agreement,
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	bankruptcy case, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determini b. Preparation and filing of any petition, schedules, statement of affairs and plan which may lead to the debtor of the debtor at the meeting of creditors and confirmation hearing, and any Representation of the debtor in adversary proceedings and other contested bankruptcy materials. c. [Other provisions as needed] 	be required; adjourned hearings thereof;	
6.	6. By agreement with the debtor(s), the above disclosed fee does not include the following service	s:	
	CERTIFICATION		
	I certify that the foregoing is a complete statement of any agreement or arrangement for payment t proceeding.	o me for representation of the debtor(s) in this bank	ruptcy
ŀ			
	July 21, 2009	Wh	
"	Date Douglas B. Jacobs 084153 Douglas B. Jacobs Jacobs, Anderson, Potter and Chaplin 20 Independence Circle Chico, CA 95973		
í	diagoha@ingahandarson.com		







1996 Geo Prizm Sedan 4D

BLUE BOOK® PRIVATE PARTY VALUE

Do you own this car? It may qualify for a \$3,500 or \$4,500 credit (in lieu of trade-in cash) toward the purchase of a more fuel-efficient new car.

Click here to find out



Condition	Value
Excellent	\$2,300
Good	\$2,000

*	Fair	\$1,650
		, ,

(Selected)

Vehicle Highlights

Mileage:

85,000

Engine:

4-Cyl. 1.6 Liter 5 Speed Manual

Transmission: Drivetrain:

FWE

Selected Equipment

Standard

AM/FM Stereo

Dual Front Air Bags

Blue Book Private Party Value

Private Party Value is what a buyer can expect to pay when buying a used car from a private party. The Private Party Value assumes the vehicle is sold "As Is" and carries no warranty (other than the continuing factory warranty). The final sale price may vary depending on the vehicle's actual condition and local market conditions. This value may also be used to derive Fair Market Value for insurance and vehicle donation purposes.

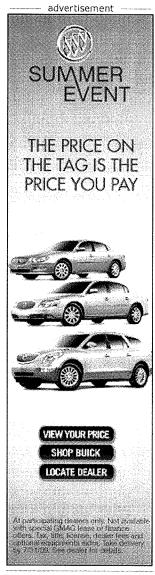
Vehicle Condition Ratings

Excellent

CRICICAL

\$2,300

- Looks new, is in excellent mechanical condition and needs no reconditioning.
- Never had any paint or body work and is free of rust.
- Clean title history and will pass a smog and safety inspection.
- Engine compartment is clean, with no fluid leaks and is free of any wear



Close Window

or visible defects.

· Complete and verifiable service records.

Less than 5% of all used vehicles fall into this category.

Good

CCC

\$2,000

- Free of any major defects.
- Clean title history, the paints, body, and interior have only minor (if any) blemishes, and there are no major mechanical problems.
- · Little or no rust on this vehicle.
- · Tires match and have substantial tread wear left.
- A "good" vehicle will need some reconditioning to be sold at retail.

Most consumer owned vehicles fall into this category.

√ Fair (Selected)

CLICI

\$1,650

- Some mechanical or cosmetic defects and needs servicing but is still in reasonable running condition.
- Clean title history, the paint, body and/or interior need work performed by a professional.
- Tires may need to be replaced.
- · There may be some repairable rust damage.

Poor

a.i

N/A

- Severe mechanical and/or cosmetic defects and is in poor running condition.
- May have problems that cannot be readily fixed such as a damaged frame or a rusted-through body.
- Branded title (salvage, flood, etc.) or unsubstantiated mileage.

Kelley Blue Book does not attempt to report a value on a "poor" vehicle because the value of these vehicles varies greatly. A vehicle in poor condition may require an independent appraisal to determine its value.

* California 7/14/2009







Your Cash for Clunkers Specialists Up to \$4,500 trade-in for your current vehicle

2000 Ford Taurus LX Sedan 4D

BLUE BOOK® PRIVATE PARTY VALUE

Do you own this car? It may qualify for a \$3,500 or \$4,500 credit (in lieu of trade-in cash) toward the purchase of a more fuel-efficient new car.

Click here to find out

Condition



Value

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Excellent \$1,855

Good \$1,530

Fair \$1,155

(Selected)

Vehicle Highlights

Mileage: 150,500 Engine: V6 3.0 Liter

Transmission: Automatic Drivetrain: **FWD**

Selected Equipment

Standard

Air Conditioning Power Windows Dual Front Air Bags

\$1,855

Power Steering

AM/FM Stereo

Blue Book Private Party Value

Private Party Value is what a buyer can expect to pay when buying a used car from a private party. The Private Party Value assumes the vehicle is sold "As Is" and carries no warranty (other than the continuing factory warranty). The final sale price may vary depending on the vehicle's actual condition and local market conditions. This value may also be used to derive Fair Market Value for insurance and vehicle donation purposes.

Vehicle Condition Ratings

Excellent

Looks new, is in excellent mechanical condition and needs no reconditioning.

- Never had any paint or body work and is free of rust.
- Clean title history and will pass a smog and safety inspection.

- Engine compartment is clean, with no fluid leaks and is free of any wear or visible defects.
- · Complete and verifiable service records.

Less than 5% of all used vehicles fall into this category.

Good

CHICK

\$1,530

- · Free of any major defects.
- Clean title history, the paints, body, and interior have only minor (if any) blemishes, and there are no major mechanical problems.
- · Little or no rust on this vehicle.
- Tires match and have substantial tread wear left.
- A "good" vehicle will need some reconditioning to be sold at retail.

Most consumer owned vehicles fall into this category.

✓ Fair (Selected)

CICICI

\$1,155

- Some mechanical or cosmetic defects and needs servicing but is still in reasonable running condition.
- Clean title history, the paint, body and/or interior need work performed by a professional.
- Tires may need to be replaced.
- There may be some repairable rust damage.

Poor

2.3

N/A

- Severe mechanical and/or cosmetic defects and is in poor running
- May have problems that cannot be readily fixed such as a damaged frame or a rusted-through body.
- Branded title (salvage, flood, etc.) or unsubstantiated mileage.

Kelley Blue Book does not attempt to report a value on a "poor" vehicle because the value of these vehicles varies greatly. A vehicle in poor condition may require an independent appraisal to determine its value.

* California 7/14/2009



Your Cash for **Clunkers Specialists**